



JOSEPH A. D'AMICO
SUPERINTENDENT

NEW YORK STATE POLICE
BUILDING 22
1220 WASHINGTON AVE.
ALBANY, N. Y. 12226-2252

TO: Records Requestor

FROM: New York State Police - Central Records Bureau

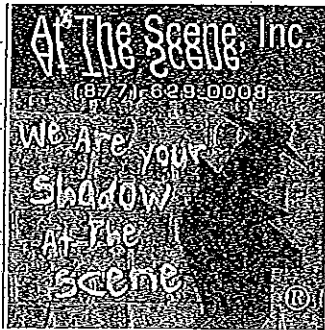
SUBJECT: RECORDS REQUEST COMPLETED

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The right of privacy for victims of sex offenses or offenses involving the transmission of the human immunodeficiency virus is to be strictly protected in accordance with New York State Civil Rights Law Article 5, Section 50-b.

When applicable, identifying information has been redacted to prevent unwarranted invasion of personal privacy. In the case of autopsy reports, information is redacted to comply with County Law.

Pending investigation reports are stamped *preliminary*. For further information with regard to pending investigations, please contact the investigating officer(s) noted in the report. Photograph requests must be made to the Identification Section located in headquarters of the investigating Troop.



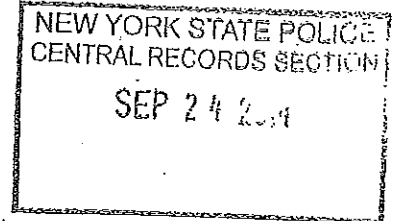
At The Scene®, Inc.
601 Pittston Avenue
Scranton, PA 18505

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Phone: 570-842-3366
www.atthescene.com
www.theshadowpi.com
www.shadowpi.com

Sent Via the United States Postal Service

September 22, 2014

New York State Police
Central Records
1220 Washington Avenue, Bldg.22
Albany, NY 12226-2252



Re: Justin Maher
At The Scene® File No.: 5390

Dear Sir/Madam:

We are a licensed Private Investigative firm in the States of Pennsylvania, New York and New Jersey. The name of our firm is At The Scene®, Inc. and we are located 601 Pittston Avenue, Scranton, Pennsylvania 18505. We specialize in accident scene investigations.

My firm has been retained by Cognetti & Cimini, 507 Linden Street, 7th Floor, Scranton, PA 18503 representing Mr. Justin Maher. We have been hired by Cognetti & Cimini to work in the best interest of Mr. Maher regarding a two vehicle motor vehicle accident that he had been involved in on February 14, 2013 at 2:36 PM on SR 209, Deerpark, Orange County, NY involving Mr. Justin Maher, DOB - 04/28/1993 and Ms. Caitlin H. Railo, DOB - 08/12/1981. We have included a copy of the one page report obtained from the New York State Police for your review and assistance

It is to my understanding that your office is in possession of the New York State Police Accident Reconstruction Report. I am requesting that you please forward to me a copy of the complete New York State Accident Reconstruction Report and any and all related materials. I have enclosed a check for \$15.00 for your statutory fee made payable to the Superintendent of State Police.

Thank you for your advanced cooperation in this matter.

Very truly yours,

AT THE SCENE®, INC.

Gary M. Willsch

:cw
Enclosure
cc: Vincent S. Cimini, Esquire

NEW YORK STATE INCIDENT REPORT (Incident Supplemental Report)

| | | | |
|-------------------------------------|------------------|---------|------------------------|
| Agency Name: F2 TROOP F - ZONE 2 | Div/Pct: F221 | Case #: | Incident #: 4973209 |
|-------------------------------------|------------------|---------|------------------------|

| | | | | |
|----------------------------------|---------------------------|-----------------------------------|-----------------------------------|--------------|
| Incident Type PERSONAL INJURY | Location DEERPARK TOWN | Date Reported: 2/14/2013 16:20 | Occurred From: 2/14/2013 16:20 | Occurred To: |
|----------------------------------|---------------------------|-----------------------------------|-----------------------------------|--------------|

Associated Persons Information

| Type | DOB | Name | Address |
|--------------------|------------|-------------------|---|
| CHILD | 10/31/2001 | DONLEY, KIARA | 144 MARTIN RD HUGUENOT, NEW YORK 12749 |
| DRIVER 2 | 4/28/1993 | MAHER, JUSTIN T | 1 FIFTH STREET GODEFFROY, NEW YORK 12729 |
| PERSON INTERVIEWED | | SCHOEN, DON | 144 MARTIN RD |
| PERSON INTERVIEWED | | KOSLNAK, MARY B | 215 HAIL SCRABBLE RD |
| PERSON INTERVIEWED | | MARTUCCI, MICHAEL | QUALITY BUS - 504 STATE ROUTE 42 SPARROWBUSH, NEW YORK 12780 |
| PERSON INTERVIEWED | | ELLIOT, WILLIAM | 1 5TH STREET |
| PERSON INTERVIEWED | | VANDUNK, LYLE K | 379 RINGWOOD AVE WANAQUE, NEW JERSEY 07465 |
| PERSON INTERVIEWED | | STARR, WILLIAM | 30 JONES ROAD |
| PERSON INTERVIEWED | | WITT, DANIEL | 807 OAKLAND VALLEY RD CUDDEBACKVILLE, NEW YORK 12729 |
| SUSPECT | 8/12/1981 | RAILO, CAITLIN H | 5 WHITE ST APT 2 PORT JERVIS, NEW YORK 12771 |

| Incident Type | Location | Date Reported: | Occurred From: | Occurred To: |
|-----------------|---------------|-----------------|-----------------|--------------|
| PERSONAL INJURY | DEERPARK TOWN | 2/14/2013 16:20 | 2/14/2013 16:20 | |

Incident Narratives

| Date of Action | Date Written | Narrative |
|----------------|--------------|-----------------------------|
| 3/25/2014 | 3/25/2014 | CLOSING SUPPLEMENTAL REPORT |

On 09/17/13, the camera hard drive from the school bus was TOT'd the Orange County District Attorney's office. Receipt (Genl. 15) attached as Enclosure Number 11.

On 03/17/14, suspect CAITLIN RAILO pled guilty to assault in the second degree in Orange County Court and sentenced to state prison.

On 03/25/14, remaining evidence (blood kit) was forwarded for destruction.

Enclosure:
11. Genl. 15

ARREST - ADULT

Reporting Officer  TIMOTHY DYMOND
Incident Status: ARREST - ADULT

Status Date: 2/14/13

15 REV. 4/85 NYSP RECEIPT AND RELEASE OF PROPERTY

NEW YORK STATE POLICE
RECEIPT

- May be handwritten.
- Original to Division Headquarters.
- Copy to Evidence Custodian, if required.

CASE NUMBER

RCN

MEMBER'S NAME

POP

STATION

DATE

MEMBER'S NAME

Item
#3

DESCRIPTION OF PROPERTY

Camera hard drive - Sean Camera from school bus.

VEHICLE:

YEAR

MAKE

MODEL

STYLE

COLOR

VIN NUMBER

PLATE NUMBER

REGISTRATION STATE

RELEASE

SIGNATURE

UNDER PENALTY OF PERJURY, I,

HEREBY IDENTIFY THE PROPERTY DESCRIBED ABOVE AS THE PROPERTY BELONGING TO *me - *owner - agent of owner,

AND HAVING REQUESTED ITS RETURN, HEREBY ACKNOWLEDGE RECEIPT OF SUCH PROPERTY WHICH IS DELIVERED INTO MY POSSESSION BY A POLICE OFFICER AND MEMBER OF THE NEW YORK STATE POLICE ON THE 17th DAY OF September 20 13.

AT Goshen, N.Y. I DO HEREBY RELEASE AND FOREVER DISCHARGE SAID POLICE OFFICER, THE NEW YORK STATE POLICE AND ANY AND ALL PERSONS WHO HAVE HAD SUCH PROPERTY IN THEIR CUSTODY OR UNDER THEIR CONTROL BY REASON OF ANY PROCEEDING OR ACTION TAKEN BY THEM FOR ITS PRESERVATION TO ITS RETURN TO *me the owner, OF AND FROM ALL, AND ALL MANNER OF ACTION AND ACTIONS, CAUSE, AND CAUSES OF ACTION, SUITS, DEBTS, SUMS OF MONEY, ACCOUNTS, DAMAGES OR CLAIMS OF ANY NATURE WHATSOEVER.

DATED AT Goshen, N.Y.

09-17

20 13

WITNESS

OWNER / AGENT OF OWNER

CRU-1 (Rev 05/2010)

Collision Reconstruction Findings Report

Page 1 of 1

| | | | | | | | | | | | |
|--|-----------|------------------------------|-----------|----------------------------------|-------------------------------|-------------------------------------|-----------|------------------------|-----------|-----------------|-------------------------------|
| NYSP Station / Outside Agency SP Middletown | | | | T/Z/S F221 | | | | Case Number 4973209 | | | |
| Collision Date 02/14/13 | | Time of Collision 2:36 PM | | C/T/V of Collision T/Deerpark | | | | County Orange | | | |
| Location State Route 209 and Peenpack Trail | | | | | | | | | | | |
| X | Vehicle 1 | - | Bicyclist | - | Pedestrian | X | Vehicle 2 | - | Bicyclist | - | Pedestrian |
| Last, First, MI Railo, Caitlin H. | | Operator | | DOB 08/12/81 | - X Deceased Injured | Last, First, MI Maher, Justin T. | | Operator | | DOB 04/28/93 | - X Deceased Injured |
| Last, First, MI Donley, Klara | | Passenger | | DOB 10/31/01 | - - Deceased Injured | Last, First, MI - | | Passenger | | DOB - | - - Deceased Injured |
| Last, First, MI - | | Passenger | | DOB - | - - Deceased Injured | Last, First, MI - | | Passenger | | DOB - | - - Deceased Injured |
| Last, First, MI - | | Passenger | | DOB - | - - Deceased Injured | Last, First, MI - | | Passenger | | DOB - | - - Deceased Injured |
| Last, First, MI - | | Passenger | | DOB - | - - Deceased Injured | Last, First, MI - | | Passenger | | DOB - | - - Deceased Injured |

| | | | | | |
|-------------------|-----------------------------|------|-------|-------------------------------|---|
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| | | | |
|---|---|---|---|
| Report Type: | <input checked="" type="checkbox"/> Full Report | <input type="checkbox"/> Summary Report | <input type="checkbox"/> Diagram Report |
| | <input type="checkbox"/> Supplemental Report | <input type="checkbox"/> Amended Report | <input type="checkbox"/> No Report / Consultation (Explain) |
| Comments: Two vehicle personal injury collision | | | |

| | | | |
|--|--|---------------------------|-----------------------------|
| Submitted By (Rank & Name) Investigator Daniel S. Smith | | Shield 3086 | |
| Troop CRU / Station Troop "F" Middletown | | FIU Lead Number 13-103 | Date Submitted 05/20/13 |
| 1 st Peer Review By Investigator Glenn P. Walsh | | Shield 4430 | Date Reviewed 05/22/13 |
| 2 nd Peer Review By (If required) Senior Investigator Michael J. MacIntosh <i>Michael J. MacIntosh</i> | | Shield 2903 | Date Reviewed 07/02/2013 |

I. INTRODUCTION

On February 14, 2013 at approximately 2:50 p.m. Senior Investigator William Moloney, Troop "F" Forensic Identification Unit (F-FIU) advised me, Trooper Daniel S. Smith, Troop "F" Collision Reconstruction Unit (F-CRU) of a two vehicle personal injury collision. The collision scene was located in the Town of Deerpark, Orange County, New York.

I arrived on the scene at approximately 3:40 p.m. It was located on State Route 209 at the intersection of Peenpack Trail and Swartwout Road. New York State Police personnel on the scene included Captain Joseph Tripodo, Senior Investigators Patrick Beyea and William Moloney, Investigators Joseph Gallagher, Kevin Chorzempa, and Susan Buckley, Zone Sergeant Michael Quinn, Troopers Daniel Quinones and Michael Moran. Town of Deerpark Police Department personnel were also on scene assisting with traffic management. Members and equipment of the Huguenot Fire Department assisted with vehicle stabilization.

Trooper Quinones reported that the weather at the time of his arrival was cool and the sky was clear. The roadway was dry. The involved vehicles remained at the scene, and the evidence associated with them indicated that they remained at their position of final rest.

I took photographs of the scene, documenting its condition at the time of the investigation. Trooper Anderson and I forensically mapped the scene with a Leica TS-02 Electronic Total Work Station (Serial #1327259) and an Archer Data Collector (Serial #80455.)

For report clarity, the involved vehicles are identified as follows:

*Vehicle One: 2003 Freightliner Bus, color yellow, bearing New York registration 55171BA.
Vehicle Two: 1995 Honda Civic Del Sol, color blue, bearing New York registration GCM1437.*

II. COLLISION SCENE DESCRIPTION

State Route 209 was a two-lane, two-way individual flow roadway oriented in a north-south direction. Peenpack Trail and Swartwout Road intersected State Route 209 in the area of the collision. Peenpack Trail was located to the west and continued in a westerly direction. Swartwout Road was located to the east and continued in an easterly direction. Peenpack Trail was a two-lane, two-way individual flow roadway oriented in an east-west direction. Swartwout Road was a two-lane, two-way individual flow roadway oriented in an east-west direction. The roadway surfaces in the area of the collision were constructed of asphalt, which were all moderately traffic polished.

State Route 209 measured 29.6 feet in width from pavement edge to pavement edge. The two travel lanes measured 22.1 feet in width from the western white fog line to the eastern white fog line. The northbound travel lane measured 10.9 feet in width

from the yellow centerline marking to the eastern white fog line. The eastern shoulder measured 4.1 feet in width from the white eastern fog line to the eastern pavement edge. The southbound travel lane measured 10.6 feet in width from the yellow centerline marking to the western white fog line. The western shoulder measured 3.7 feet in width from the white western fog line to the western pavement edge. While traveling northbound on State Route 209, prior to the intersection of Peenpack Trail, there was a solid yellow line in the center of the roadway for the northbound lane and a dashed yellow line for the southbound lane. These lane markings indicate passing was not permitted for northbound traffic, and was permitted for southbound traffic when safe to do so. While traveling southbound on State Route 209, prior to the intersection of Peenpack Trail, there was a solid yellow line in the center of the roadway for the southbound traffic and a dashed yellow line for northbound traffic. These lane markings indicate passing was not permitted for southbound traffic, however it was permitted for northbound traffic when safe to do so. The speed limit in the area of the collision on State Route 209 was posted at 45 miles per hour (mph). Approaching the intersection from both the north and south there was a yellow diamond shaped intersection warning sign with a yellow advisory speed sign of 30 mph underneath it in each direction.

Peenpack Trail measured 28.3 feet in width from pavement edge to pavement edge. There was a white stop bar on the pavement on the eastern side of Peenpack Trail at the intersection of State Route 209. There were no other pavement markings on Peenpack Trail. Swartwout Road measured 25.2 feet in width from pavement edge to pavement edge. There were no pavement markings located on Swartwout Road.

The collision occurred in a rural residential area. Traffic approaching the collision scene from the south (traveling north) passed through a gradual left hand curve and the roadway was relatively level. Sight distance to the collision scene in this direction was approximately 600 feet. Traffic approaching the collision scene from the north (traveling south) passed through a gradual right hand curve and a slight uphill grade. Sight distance to the collision scene in this direction was approximately 500 feet. In the area of the collision the roadway was relatively level. The roadway surface was dry and remained dry throughout the course of the at-scene investigation.



SR-209 facing northbound



SR-209 facing southbound

III. COLLISION SCENE EVIDENCE

Refer to the attached scale diagrams at the end of the report for evidence locations

Several items of physical evidence were observed during the course of the scene investigation. The evidence was observed in the intersection of State Route 209 and Peenpack Trail. All measurements are referenced to the utility pole #145 S located along the west shoulder of State Route 209 and the north side of Peenpack Trail.

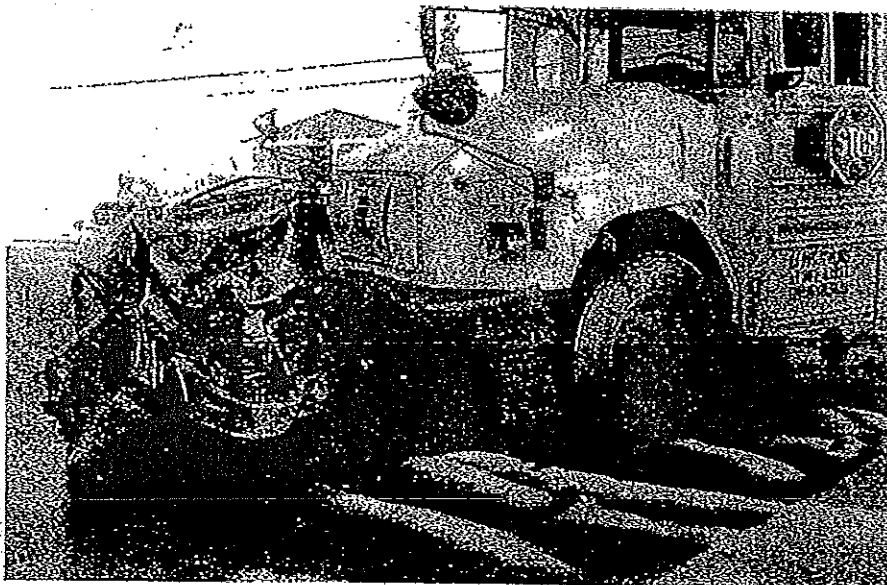
There was a pair of parallel tire marks (Tire mark #1. & #2) located in the southbound lane of State Route 209. They were located approximately 24.1 feet and 19.6 feet southeast of the reference point. The marks measured 25.9 feet and 24.5 feet in length. These marks were created by Vehicle Two as it slid to the area of impact with Vehicle One.

A group of metal roadway scars were observed near the center of the southbound lane of State Route 209 approximately 39.6 feet southeast of the reference point. The marks ranged in length from 1.0 feet to .5 feet. These marks indicate the area of impact between Vehicles One and Two.

The front license plate of Vehicle Two was observed approximately 43.4 feet southeast of the reference point.

Vehicle One was observed 29.5 feet south of the reference point at its position of final rest. Vehicle One was facing in a northwesterly direction in an upright position.

Vehicle Two was observed 21.3 south of the reference point at its position of final rest. Vehicle Two was facing in a southerly direction in an upright position.



Vehicles at final rest.

IV. VEHICLE EXAMINATIONS

Vehicle One

Vehicle One was a yellow 2003 Freightliner school bus, bearing New York registration 55171BA¹, Vehicle Identification Number (VIN) 4UZAAXCS43CL04762.

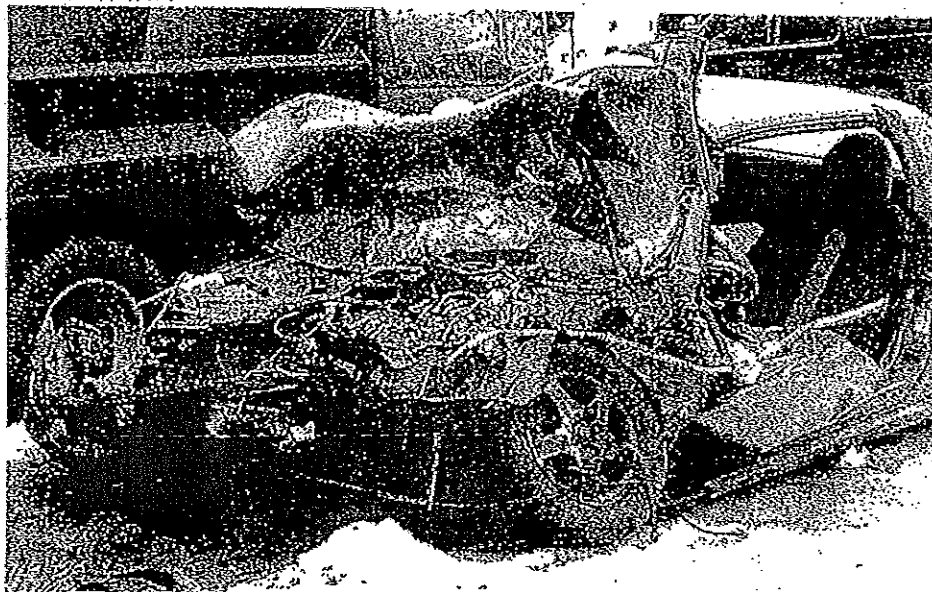
The odometer was digital therefore, it was unreadable. The speedometer read 0 mph. The tachometer read 0 revolutions per minute (rpm). The vehicle displayed a valid New York State Department of Transportation Safety sticker #477690 expiring on April 26, 2013.

Initial contact damage was observed to the right front corner of Vehicle One. The front bumper was pushed inward and rearward, the left side of the hood was cracked.

A level 7 examination was performed on Vehicle One by Trooper Robert Longendyke of the New York State Police Commercial Vehicle Enforcement Unit on February 15, 2013². The violations observed to the vehicle were determined to be as result of the collision.

The National Highway Traffic Safety Administration Office of Defects and Recalls Database was checked and revealed no recalls or defects which would have contributed to the collision.

Vehicle Two



Vehicle Two

¹ Registered to Quality Bus Service LLC, 504 RT 42 PO Box 600, Sparrowbush, New York 12780.

² New York State Police Commercial Vehicle Enforcement Unit Report number NYSPF0043834.

Vehicle Two was a blue 1995 Honda Civic Del Sol, 2-door sedan, bearing New York State registration GCM1437³, VIN JHMEG1249SS006148.

The odometer read 065,673 miles and the trip meter read 110.1 miles. The speedometer read 0 mph. The tachometer needle was damaged and was pointing downward therefore, it was unreadable. The vehicle displayed a valid New York State inspection sticker that was valid until 3/31/13. The inspection sticker number was unreadable due to the collision damage.

Vehicle Two sustained a substantial amount of contact and induced damage as a result of the collision. Initial contact damage was observed to the left front corner of Vehicle Two. Beginning at the left front corner of the vehicle, the left front fender was pushed rearward and toward the right of the vehicle. The top of the left front tire was pushed inward. The hood was pushed rearward and to the right. The left front headlight assembly was destroyed. The front bumper was pushed toward the right. Induced damage was observed to the engine compartment. Most of its components including the radiator, engine and transmission were displaced towards the rear and right of the vehicle. Induced damage was also observed through out the passenger compartment with the dashboard and steering column being displaced toward the right side of the vehicle. Blood was observed on the steering wheel, center console and gear shift lever.

The vehicle was equipped with two Raptor model Riken tires, size 195/60R14 on the front. The left tire measured 40 pounds per square inch (psi) and the right tire measured 22 (psi). The rear two tires were Goodride model Radial SP06 tires, size 175/70R13. The left rear tire measured 30 psi and the right rear tire measured 32 psi. All four tires had sufficient tread depth. The manufacturer's recommend tire size was 175/70R13.

Vehicle Two was equipped with a 3-point lap/shoulder seatbelt for the front driver's seat and front passenger's seat. The driver's seatbelt was retracted and extended freely. There was no physical evidence on the seatbelt or buckle to determine if the seatbelt was in use at the time of the collision.

The vehicle was equipped with dual frontal airbags. The driver's side airbag did not deploy, however the passenger's side airbag did deploy.

The National Highway Traffic Safety Administration Office of Defects and Recalls Database was checked and revealed no recalls or defects which would have contributed to the collision.

³ Registered to Justin Tyler Maher 1 Fifth Street, Godeffroy, New York, 12729.

V. COLLISION PHASES

Pre-Impact

Vehicle One was traveling north on State Route 209. Vehicle Two was traveling south on State Route 209. Vehicle One attempted to make a left hand turn onto Peenpack Trail.

Impact

Vehicle One strikes the left front corner of Vehicle Two at the intersection of State Route 209 and Peenpack Trail near the center of the southbound lane of State Route 209.

Post-Impact

Vehicle One continues to travel in its intended direction, left onto Peenpack Trail, with Vehicle Two impinged under the left front bumper of Vehicle One. Both vehicles traveled together for approximately 23.2 feet in a northwesterly direction coming to their position of final rest on Peenpack Trail.

VI. MATHEMATICAL FINDINGS

Due to the dynamics of this collision, a speed at impact for each vehicle was not able to be calculated. A pre-impact speed of Vehicle Two was calculated. The equivalent energy speed loss formula was utilized in order to determine the minimum amount of speed that vehicle Two lost prior to the collision with Vehicle One. That speed was calculated to be 24 mph. It should be noted that this calculated speed does not represent the speed of the vehicle at the time of the collision, nor the speed of the vehicle when the skid marks began.

This calculation was performed in a conservative manner and in accordance with accepted collision reconstruction protocols.

VII. SPECIAL TOPICS

Injury Patterns

Vehicle One

The operator of Vehicle One, Caitlin H. Railo, was transported to Bon Secours Hospital, Port Jervis, New York for injuries to her neck.

The passenger in Vehicle One was not injured as a result of the collision.

Vehicle Two

The operator of Vehicle Two, Justin T. Maher, was transported to Westchester Medical Center, Valhalla, New York to be treated for injuries that included multiple fractures to both arms and both legs, cracked ribs, broken upper and lower jaw, broken orbital bones, and a collapsed lung.

Occupant Kinematics

Vehicle One

The principle direction of force applied to Vehicle One during impact was from right to left, right of the vehicle's center of mass. This would cause the occupants to be projected forward and to the right.

Vehicle Two

The principle direction of force applied to Vehicle Two during impact was from front to back, inline of the vehicle's center of mass. This would cause an occupant to be projected forward.

Crash Data Retrieval Analysis

Vehicle One and Two

Crash Data Retrieval software 10.0.1 does not support the models and years of both vehicles.

Driver History

Vehicle One

The operator of Vehicle One, Caitlin H. Railo, D.O.B. 08/21/81, 5 White St. Apt. 2, Port Jervis, NY 12771, possessed a valid CDL class *B* New York State driver's license with school bus and passenger endorsements. This was the proper class license to operate Vehicle One.

A toxicology analysis was performed on the operator of Vehicle One's blood. The report states that Diazepam and Morphine were present in the blood⁴.

⁴ New York State Police Mid Hudson Regional Crime Laboratory Toxicology Report.

Vehicle Two

The operator of Vehicle Two, Justin Tyler Maher, D.O.B. 04/28/93, 1 Fifth St., Godeffroy, NY 12729, possessed a valid class *D* New York State driver's license. This was the proper class license to operate Vehicle Two.

VII. CONCLUSION/FINDINGS

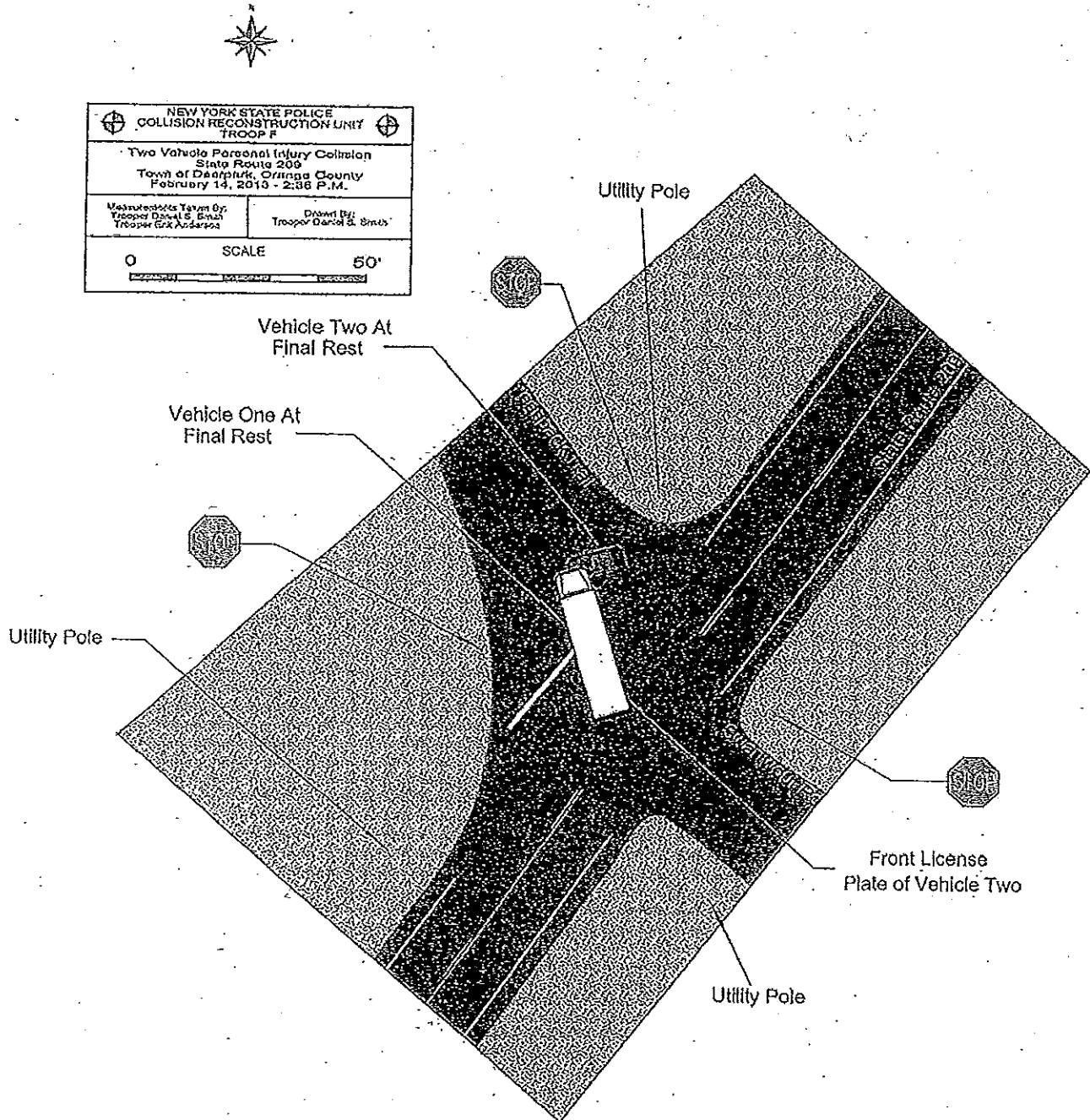
Based upon the interpretation of the scene evidence, the vehicle examinations, mathematical findings, injury patterns, occupant kinematics and driver histories the following conclusions were drawn: Vehicle One was traveling northbound on State Route 209 approaching the intersection on Peenpack Trail and Vehicle Two was traveling southbound on State Route 209, also approaching the intersection of Peenpack Trail. Vehicle One begins to make a left hand turn onto Peenpack Trail and strikes Vehicle Two as it continues through the intersection.

There was no evidence of roadway or environmental conditions which would have contributed to this collision.

The primary contributing factor for this collision is on part of the operator of Vehicle One, Caitlin H. Railo, for failing to yield the right of way while turning left.

A secondary contributing factor for this collision is also on the part of the operator of Vehicle One for having Diazepam and Morphine present in her blood.

The blood results will be addressed under separate cover by the New York State Police Bureau of Criminal Investigation from the Middletown barracks.



| | | | | | | | | | |
|--|--|-------------------------|--|---|--|--------------------------|--|---|--|
| 1. Agency F2 TROOP F - ZONE 2 | | 2. Div/Precinct F221 | | 3. ORI NY1350200 | | 5. Case No. | | 6. Incident No. 4973209 | |
| 7,8,9. Date Reported (Day, Date, Time) THURSDAY 02/14/2013 16:20 | | | | 10,11,12. Occurred On/From (Day, Date, Time) THURSDAY 02/14/2013 16:20 | | | | 13,14,15. Occurred To (Day, Date, Time) | |
| 16. Incident Type ACCIDENT-PERSONAL INJURY | | | | | | 17. Business Name | | | |
| 19. Incident Address (Street Name, Bldg. No., Apt. No.) STATE ROUTE 209 | | | | | | | | | |
| 20. City/State/Zip HUGENOT NEW YORK 12746 | | | | | | | | | |
| 21. Location Code (ISLED) DEERPARK TOWN 3654 | | | | 23. No. of Victims 1 | | 24. No. of Suspects 1 | | 26. Victim also Complainant? | |
| Location Type STRBET | | | | | | | | | |

| 2. DATE | 1. A/V | SECTION | SUB | TYPE | CLASS | DEG | BY | NAME OF OFFENSE | PTS |
|---------|--------|---------|-----|------|-------|-----|----|---|-----|
| 1. | PL | 120.04 | 03 | D | F | 1 | C | VEHIC ASLT 1:PREV CONV VTL1192 IN 10 YRS-NYS/OTHER STAT | 1 |
| 2. | VTL | 1192 | 04B | E | F | 0 | C | DWAI BY DRUGS: OPERATE SCHOOL BUS WITH STUDENT PASSE | 1 |
| 3. | PL | 260.10 | | A | M | 0 | C | ENDANGERING WELFARE OF CHILD | 1 |

ASSOCIATED PERSONS

| TYPE | NAME (Last, First, Middle, Initial) | DOB | Street Name Bldg. No. City, State, Zip | Home Phone Bus. Phone |
|--------------------|-------------------------------------|------------|--|--------------------------|
| CHILD | DONLEY, KIARA | 10/31/2001 | 144 MARTIN RD HUGENOT NY 12749 | |
| DRIVER 2 | MAHER, JUSTIN, T | 04/28/1993 | 1 FIFTH STREET GODEFFROY NY 12729 | |
| PERSON INTERVIEWED | VANDUNK, LYLE, K | | 379 RINGWOOD AVE WANAQUE NJ 07465 | |
| PERSON INTERVIEWED | MARTUCCI, MICHAEL | | QUALITY BUS - 504 STATE ROUTE 42 SPARROWBUSH NY 12780 | |
| PERSON INTERVIEWED | STARR, WILLIAM | | 30 JONES ROAD PINE BUSH NY | (845)346-5017 |
| PERSON INTERVIEWED | KOSELNAK, MARY, B | | 215 HAIL SCRABBLE RD PORT JERVIS NY | |
| PERSON INTERVIEWED | SCHOEN, DON | | 144 MARTIN RD HUGENOT NY | |
| PERSON INTERVIEWED | WITT, DANIEL | | 807 OAKLAND VALLEY RD CUDDEBACKVILLE NY 12729 | |
| PERSON INTERVIEWED | ELLIOT, WILLIAM | | 1 5TH STREET GODEFFROY NY | |
| SUSPECT | RAILO, CAITLIN, H | 08/12/1981 | 5 WHITE ST APT 2 PORT JERVIS NY 12771 | |

SUSPECT

| | | | | | | | |
|---|-------------------------------|---|----------------------------|---|----------------------|-------------------|---------------------|
| Person ID # 5524924 | 34. Type SUSPECT | 35. Name (Last, First, Middle) RAILO, CAITLIN, H | | | | | |
| 37. Apparent Condition APPARENTLY NORMAL | | | | 38. Address (Street Name, Bldg., Apt. No., City, State, Zip) 5 WHITE ST APT 2 PORT JERVIS NY 12771 | | | |
| 39a. Home Phone [REDACTED] | 39b. Work Phone [REDACTED] | 40. Social Security [REDACTED] | 41. DOB 08/12/1981 | 42. Age 31 | 43. Gender FEMALE | 44. Race WHITE | |
| 45. Ethnicity NOT HISPANIC | 46. Skin FAIR | 47. Occupation SERVICE OCCUPATIONS | | | | | |
| 48. Height 5ft. 5in. | 49. Weight 125lbs. | 50. Hair BROWN | 51. Eyes BROWN | | 52. Glasses NO | | 53. Build PETITE |
| 54. Employer/School | | | 55. Employer Address NY | | | | |
| 56. Scars/Marks/Tattoos /Description | | | | | | | |

36. Alias/Nickname/Maiden Name

| Last Name | First Name | Middle Name |
|-----------|------------|-------------|
| | | |

PROPERTY

| | | |
|--|---------------------------|------------------|
| 58. Name MARTUCCI, MICHAEL | Property Status SEIZED | |
| Property Type COMPUTER HARDWARE/SOFTWARE | Make or Model / Drug | |
| Serial No. | Qty/Measure | Value \$ 1.00 |
| Description hard drive from school bus camera | | |

Total Property Value : \$1.00

VEHICLE

| | | | | |
|--------------------------------|----------------------------------|--|--------------|-----------|
| 59. Vehicle Status TOWED | 60. License Plate No. 55171BA | 61. State NY | 62. Exp. Yr. | 64. Value |
| 63. Plate Type | 65. Year 2003 | 66. Make 67. Model FREIGHTLINER CORP. UNKNOWN | | |
| 68. Style BUS | 69. VIN 4UZAAXCS43CL04762 | 70. Color(s) ORANGE | | |
| 71a. Towed By HOCKENBERRY'S | 71b. Towed To HOCKENBERRY'S | | | |
| 72. Vehicle Notes | | | | |

| | | | | |
|--------------------------------|----------------------------------|--|--------------|-----------|
| 59. Vehicle Status TOWED | 60. License Plate No. GCM1437 | 61. State NY | 62. Exp. Yr. | 64. Value |
| 63. Plate Type | 65. Year 1995 | 66. Make 67. Model HONDA CIVIC, CIVIC DEL SOL | | |
| 68. Style SEDAN* | 69. VIN JHMEG1249SS006148 | 70. Color(s) GREEN | | |
| 71a. Towed By HOCKENBERRY'S | 71b. Towed To HOCKENBERRY'S | | | |
| 72. Vehicle Notes | | | | |

NARRATIVE

| Date of Action | Date Written | Officer Name & Rank |
|--|--------------|------------------------|
| 02/14/2013 | 02/14/2013 | QUINONES, DANIEL (TPR) |
| Narrative | | |
| <p>1. I responded to the intersection of State Route 209 and Peenpack Trail, Town of Deerpark, for a car vs. school bus motor vehicle accident with serious physical injuries.</p> <p>2. I was met by Town of Deerpark Pd. Sergeant SULLIVAN who stated due to the injuries and possible fatality, her agency is turning over the investigation to State Police.</p> <p>3. Interviews of witnesses revealed a 2003 Freightliner school bus bearing NY registration 55171BA, operated by CAITLIN H. RAILO had made a left turn from State Route 209 onto Peenpack Trail and failed to yield right-of-way to a 1995 Honda Civic bearing NY registration GCM1437, operated by JUSTIN T. MAHER who was unresponsive at scene and had to be extricated by Huguenot Fire Department personnel. MAHER was air-lifted to Westchester Medical Center.</p> <p>4. An eleven year old school bus occupant was sitting in front seats and sustained no injuries. She was tot'd to her parents at scene.</p> <p>5. I notified Sgt. WARD who notified BCI, CRU and CVEU.</p> <p>6. Supporting depositions obtained from witnesses WILLIAM STARR and LYLE VANDUNK. (Enclosure 1 and Enclosure 2)</p> <p>7. Scene reconstructed by CRU members Tpr. SMITH and ANDERSON.</p> <p>8. CVEU Trooper LONGENDYKE arrived on scene and inspected school bus. Trooper Longendyke found the bus had no obvious issues or defective equipment.</p> <p>9. Hockenberry tow arrived to remove both vehicles from scene.</p> <p>10. Case tot'd Inv. DYMOND. MVA-104A to be completed. Charges pending.</p> | | |
| Date of Action | Date Written | Officer Name & Rank |
| 02/14/2013 | 02/15/2013 | DYMOND, TIMOTHY (INV) |
| Narrative | | |
| <p>11. Myself and Investigator Skarkas responded to Bon Secors Hospital in Port Jervis to interview Caitlin Railo, the operator of the school bus involved. Caitlin agreed to give a statement about the accident in which she stated in sum and substance that she was stopped on S/R 209 in the Town of Deerpark getting ready to make a left turn onto Peenpack Road. She stated she checked for oncoming traffic and saw none and proceeded to turn left. As she entered her turn a vehicle traveling a high rate of speed came out of nowhere and struck the front end of her school bus. She described the operator of the other car as a white male wearing a hooded sweatshirt. She also advised she does take some medications daily. During our conversation I noticed Caitlin had constricted pupils and droopy eye lids. I asked Caitlin to perform SFST's which she failed. (Supporting Depo Railo Enclosure 3)</p> <p>12. Caitlin gave consent for us to take a blood sample and signed the required form. She was also evaluated by NYSP DRE Trooper Jason Vidocavich and was positive for CNS depressants. [REDACTED]</p> | | |
| Date of Action | Date Written | Officer Name & Rank |
| 02/15/2013 | 02/15/2013 | DYMOND, TIMOTHY (INV) |
| Narrative | | |
| BCI CASE ADOPTION- VEHICULAR ASSAULT- INVESTIGATOR DYMOND ASSIGNED. | | |
| Date of Action | Date Written | Officer Name & Rank |
| 02/15/2013 | 02/15/2013 | DYMOND, TIMOTHY (INV) |
| Narrative | | |
| <p>13. I contacted the owner of Quality Bus Service, Michael Martucci, and asked him for consent to retrieve the video that was taken inside the school bus on the day of the accident. Michael came to SP-Middletown with his laptop computer and signed consent for the recovery of the video and assisted with downloading. Michael also provided all the paperwork that Caitlin filled out to gain employment with the Quality Bus Service. We retrieved the hard drive from the bus computer and secured it as evidence in SP Middletown. The bus was released from SP-Middletown to Hockenberry's garage. Upon review of the video secured from inside the bus it is obvious that Caitlin does not stop prior to making her turn onto Peenpack trail as she stated she did during our interview with her at the hospital. The video shows Caitlin is engaged in conversation with the child passenger and rolls into the</p> | | |

turn and strikes an oncoming vehicle. ITC

| Date of Action | Date Written | Officer Name & Rank |
|----------------|--------------|-----------------------|
| 02/20/2013 | 02/20/2013 | DYMOND, TIMOTHY (INV) |

Narrative

14. Myself and Investigator Gallagher brought the blood kit to the MidHudson Crime Lab.

15. I spoke with Justin's Grandfather, William Elliot, who advised Justin is still in a medically induced Coma. He had updated information regarding Justin's injuries listed as follows: multiple fractures in both arms and legs, a collapsed lung and several cracked ribs, broken upper and lower jaw, broken orbital bones, and a broken nose. William advised Justin has several surgery's scheduled over the next couple days. ITC.

16. I advised the OCDA's office of the case and briefed ADA Julie Mohl. ITC

| Date of Action | Date Written | Officer Name & Rank |
|----------------|--------------|-----------------------|
| 02/26/2013 | 02/26/2013 | DYMOND, TIMOTHY (INV) |

Narrative

17. I contacted Crime Victim Advocate Lori Wolkoff and advised her of the situation. Lori contacted William Elliot and advised him of the help that is available.

18. I was contacted by Michael Martucci from Quality Bus Services and he advised that Caitlin Railo's D.O.T. drug test results came back and she was positive for opiates. Michael forwarded the results to my email. (attached as Enclosure 8)

19. I received the blood results from the NY State Police crime lab which showed Caitlin had Diazepam and Morphine in her blood the day of the collision. (attached as Enclosure 9)

20. I interviewed Inv Daniel Smith about the accident reconstruction. Dan advised that it appears Caitlin did not yield the right of way to the oncoming vehicle driven by Justin Maher. Dan further advised Justin Maher was not going above the posted speed limit. Dan advised a separate Reconstruction report will be filed when it is complete. ITC

21. On 03/22/13 myself and Sr. Inv Beyea patrolled to Helen Hayes Hospital in Rockland County to attempt to ask Justin Maher what he remembered about the accident. Justin had no recollection of the accident and provided no new information pertinent to the case.

| Date of Action | Date Written | Officer Name & Rank |
|----------------|--------------|-----------------------|
| 04/13/2013 | 04/13/2013 | DYMOND, TIMOTHY (INV) |

Narrative

22. I contacted Donald Schoen [REDACTED], Kiara Donley's guardian, and requested that Kiara give a supporting deposition regarding the bus accident. Donald told me his attorney advised him to not allow Kiara to give a deposition.

23. Patrolled to 5 White ST with Trooper Lamonica. We located Railo and transported her to SP Middletown.

24. I interviewed Caitlin at SP-Middletown in regards to the bus accident. I read Caitlin her miranda rights and she acknowledged that she understood them and that she would speak to me without a lawyer present. Caitlin advised in sum and substance that she had taken a 200 mg Morphine pill shortly after midnight the day of the accident. She advised she took the pill because she ran out of Suboxone and would get sick without it. She also advised she should not have been driving the bus but her boss would not let her take a day off because no one else knew her route. Caitlin told me she should not have been driving the day of the accident and that she had nightmares about the accident. Caitlin's statement is attached as Enclosure 5.

25. Trooper Lamonica processed Railo without incident at SP Middletown. Railo was arraigned by Tpr. Mannix and Trooper Lamonica in the T/Deerpark CT in front of T/J Wulff. Railo's stepfather, Daniel Witt (12/22/1943), posted \$5000 bail in the T/Deerpark CT. Railo has a return date of 04/17/13 @ 4pm in the T/Deerpark CT.

Closed by Arrest-PPD. Final. 13-4973209.

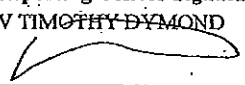

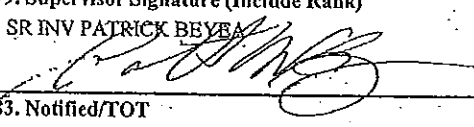
Enclosures:

1. Genl 4 Starr
2. Genl 4 Vandunk
3. Genl 4 Railo

5. Railo Statement

- 6. Genl 34D and photos
- 7. Arrest Report Caitlin Railo
- 8. DOT drug test results
- 9. Mid Hudson Regional Toxicology Report
- 10. MV 104A

ADMINISTRATIVE

| | | | |
|---|-------------------------------|---|---|
| 75. NYSPIN Message No. | | 76. Complainant Signature | |
| 77. Reporting Officer Signature (Include Rank) INV TIMOTHY DYMOND  | | 78. ID No. 1119  | 79. Supervisor Signature (Include Rank) SR INV PATRICK BEVEA  |
| 80. ID No. 2108 | | | |
| 81. Status ARREST - ADULT - PPD | 82. Status Date 02/14/2013 | 83. Notified/TOT SPFF29000032/INV DYMOND | |
| Solvability Total | | | 0 |

E-1

SUPPORTING DEPOSITION (CPL §100.20)

NEW YORK STATE POLICE

PAGE 1 OF 1

THE PEOPLE OF THE STATE OF NEW YORK

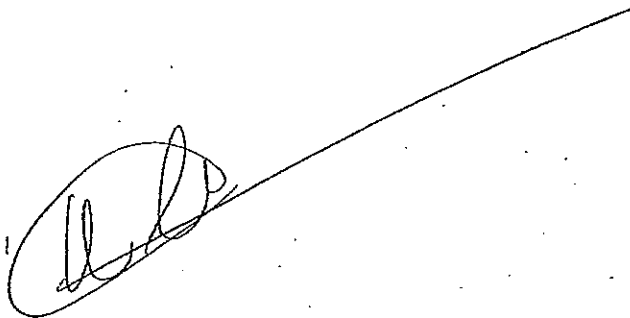
-- VS.

Defendant(s)

| | | | |
|--|-------------------------------|---|-------------------------------|
| <u>INCIDENT LOCATION:</u> STATE OF NEW YORK <u>LOCAL CRIMINAL</u> COURT COUNTY OF <u>ORANGE</u> TOWN <u>OF DEERPARK</u> | | <u>LOCATION OF DEPOSITION:</u> STATE OF NEW YORK COUNTY OF <u>ORANGE</u> TOWN <u>OF DEERPARK</u> | |
| On | Date 02/14/2013 | at | Time Started 03:27 PM |
| | | I, | Full Name: WILLIAM C STARR |
| Date of Birth | No. and Street 30 JONES RD | CITY PINE BUSH | State NY |

State The Following:

ON FEBRUARY 14, 2013 AT APPROXIMATELY 2:30PM WHILE PULLING A HOSE FROM THE SIDE THE HOUSE INTO THE FRONT YARD I OBSERVED A YELLOW SCHOOL BUS TRAVELING NORTHBOUND ON STATE ROUTE 209. THE BUS STOPPED IN THE ROAD AT THE INTERSECTION OF PEENPACK TRAIL. AT THAT TIME I DID NOT SEE A TURN SIGNAL ON THE SCHOOL BUS. I ALSO OBSERVED A VEHICLE TRAVELING SOUTHBOUND ON STATE ROUTE 209 WHEN ALL OF A SUDDEN THE SCHOOL BUS MADE A LEFT TURN IN FRONT OF THE VEHICLE TRAVELING SOUTHBOUND. I HEARD AN EXTREMELY LOUD CRASH AND RAN OVER TOWARDS THE ACCIDENT. I CALLED MY GIRLFRIEND WHO IS A NURSE AND SHE CALLED 911.


Notice

(Penal Law §210.45)

In a written instrument, any person who knowingly makes a false statement which such person does not believe to be true has committed a crime under the laws of the state of New York punishable as a Class A Misdemeanor.

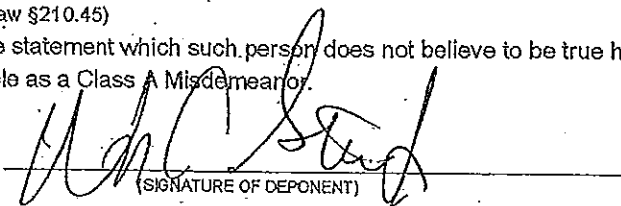
Affirmed under penalty of perjury

this 14th day of FEBRUARY, 2013

- OR -

* Subscribed and Sworn to before me

this _____ day of _____



(SIGNATURE OF DEPONENT)

(WITNESS)



(NAME OF PERSON TAKING DEPOSITION)

| | | |
|------------|------------|----------|
| Time Ended | 02/14/2013 | 03:33 PM |
|------------|------------|----------|

* This form need be sworn to only when specifically required by the court

NEW YORK STATE POLICE

THE PEOPLE OF THE STATE OF NEW YORK
-- VS.

Defendant(s)

INCIDENT LOCATION:

STATE OF NEW YORK LOCAL CRIMINAL COURT
COUNTY OF ORANGE
TOWN OF DEERPARK

LOCATION OF DEPOSITION:

STATE OF NEW YORK
COUNTY OF ORANGE
TOWN OF DEERPARK

| | | | | |
|-----------------------------|------------------------------------|---------------|--------------------------|---------------------------------|
| On | Date 02/14/2013 | at | Time Started 03:26 PM | I, Full Name: LYLE K VANDUNK |
| Date of Birth [REDACTED] | No. and Street 379 RINGWOOD AVE | CITY WANAE | State NJ | |

State The Following:

ON TODAY'S DATE AT APPROXIMATELY 2:30 PM, I WAS NORTH ON STATE ROUTE 209, TOWN OF DEERPARK, BEHIND A SCHOOL BUS OPERATING A TRACTOR-TRAILER. I OBSERVED THE BUS SLOW DOWN JUST SOUTH OF PEENPACK TRAIL, I SAW A GREEN SEDAN TRAVELING SOUTH ON STATE ROUTE 209 AND THEN OBSERVED THE BUS BEGIN TURNING LEFT ONTO PEENPACK TRAIL. THE GREEN CAR DID NOT APPEAR TO BE SPEEDING. FROM MY POINT OF VIEW I KNEW THE BUS WAS NOT GOING TO MAKE THE TURN WITHOUT CAUSING AN ACCIDENT. I HEARD THE IMPACT THEN OBSERVED THE BUS SHAKE AND COME TO A SUDDEN STOP. I WOULD ESTIMATE THE GREEN SEDAN WAS APPROXIMATELY 50 YARDS FROM PEENPACK TRAIL WHEN THE BUS BEGAN TURNING LEFT. I PULLED OVER ONTO THE SHOULDER AND DIALED 911. I RAN UP TO THE GREEN SEDAN AND OBSERVED WHAT I FIRST THOUGHT WAS A GIRL CAUSE HE HAD A GRAY HOODIE OVER HIS HEAD LAYING TOWARDS THE PASSENGER SIDE. HE WAS NOT RESPONSIVE. A DEERPARK POLICE SHOWED UP AND BEGAN HER INVESTIGATION.

Notice

(Penal Law §210.45)

In a written instrument, any person who knowingly makes a false statement which such person does not believe to be true has committed a crime under the laws of the state of New York punishable as a Class A Misdemeanor.

Affirmed under penalty of perjury

this 14 day of FEBRUARY, 2013

- OR -

* Subscribed and Sworn to before me

this _____ day of _____

* This form need be sworn to only when specifically required by the court

X

(SIGNATURE OF DEPONENT)

(WITNESS)


(NAME OF PERSON TAKING DEPOSITION)

Time Ended
02/14/2013 03:35 PM

GENL-4 (03/95)

E-3
New York State Police

SUPPORTING DEPOSITION (CPL § 100.20)

PAGE 1 OF 1

THE PEOPLE OF THE STATE OF NEW YORK
—VS.

DEFENDANT(S)

LOCATION OF INCIDENT:

STATE OF NEW YORK _____ COURT

COUNTY OF _____

OF _____

LOCATION OF DEPOSITION:

STATE OF NEW YORK

COUNTY OF OrangeTown OF Deerpark

DATE:

On 02/14/13

at

TIME STARTED:

4:13 PM

FULL NAME:

Castlin Railo08/12/81

state the following:

I am a driver for Quality Bus Service and have been employed with them for approximately four months. On today's date, at approximately 2:30 PM I was traveling northbound on State Route 209 in the Town of Deerpark, operating Bus #701. This is my normal bus route and at the time there was only one child on the bus, Kieran. I don't remember his last name, but she gets dropped off at 155 Maple Road. As I began to make a left turn onto Prospect Trail I did not see any vehicles traveling southbound on Route 209. In the midst of making the turn I saw a dark colored two-door car traveling southbound on Route 209. I estimated the vehicle to be traveling 65-70 miles per hour. The driver of the other car was a younger, white male, not wearing a seatbelt and wearing some type of fur sweat shirt. He didn't seem to be left or right.

NOTICE

(Penal Law § 210.45)

In a written instrument, any person who knowingly makes a false statement which such person does not believe to be true has committed a crime under the laws of the state of New York punishable as a Class A Misdemeanor. (u)

Affirmed under penalty of perjury

this 14th day of February, 2013

-OR-

* Subscribed and Sworn to before me

this _____ day of _____

* This form need be sworn to only when specifically required by the court

(SIGNATURE OF DEPONENT)

(WITNESS)

Inv. M.T. SkunkesInv. om
(NAME OF PERSON TAKING DEPOSITION)

TIME ENDED:

4:55 PM

SUPPORTING DEPOSITION (CPL § 100.20)

PAGE 2 OF 2THE PEOPLE OF THE STATE OF NEW YORK
—VS.

DEFENDANT(S)

LOCATION OF INCIDENT:

STATE OF NEW YORK COURT

COUNTY OF

OF

LOCATION OF DEPOSITION:

STATE OF NEW YORK

COUNTY OF OrangeTown OF DeerparkOn DATE: 02/14/13at TIME STARTED: 4:15 PM

FULL NAME:

Carlin Railo 08/12/81

state the following: but kept coming straight at me. His vehicle struck the front passenger side of the bus just as the front of the bus was entering Pecapack Trail. Once we were struck I made sure Kiera was okay and got her off the bus. I could see the driver was bleeding from the nose and I asked if he was alright. I couldn't tell what he said, but I didn't want Kiera to see him so we went across the street to the building across the street. The medications I took today are: Clonidine .01mg, one tablet at 9:45 AM Valium 5 mg 1 tablet at 9:45 AM. Yesterday I took Percocet 7.5mg 2 tablets at about 8 PM and a half Ambien 10 mg 1/2 tablet at 8 PM. I also take Suboxone 8 mg in the morning and 2 mg before bed but I haven't taken it since last week.

NOTICE

(Penal Law § 210.45)

In a written instrument, any person who knowingly makes a false statement which such person does not believe to be true has committed a crime under the laws of the state of New York punishable as a Class A Misdemeanor. (C)

Affirmed under penalty of perjury

this 14th day of February, 2013

- OR -

* Subscribed and Sworn to before me

this _____ day of _____

* This form need be sworn to only when specifically required by the court

(SIGNATURE OF DEPONENT)

(WITNESS)

Mr. M.J. Skankin

(NAME OF PERSON TAKING DEPOSITION)

TIME ENDED:

4:55 PM

STATE OF NEW YORK

STATEMENT

DATED 04/12/2013 E-5

COUNTY OF ORANGE

TOWN OF HUGUENOT

I, CAITLIN H RAILO, AGE 31, BORN ON 08/12/1981,
 AND RESIDING AT 5 WHITE STREET PORT JERVIS NY 12771
 HAVE BEEN ADVISED BY INV TIMOTHY M DYMOND
 OF THE NEW YORK STATE POLICE, OF THE FOLLOWING:

I HAVE THE RIGHT TO REMAIN SILENT, AND I DO NOT HAVE TO MAKE ANY STATEMENT IF I DON'T WANT TO. *ch*

IF I GIVE UP THAT RIGHT, ANYTHING I DO SAY CAN AND WILL BE USED AGAINST ME IN A COURT OF LAW. *ch*

I HAVE THE RIGHT TO HAVE A LAWYER PRESENT BEFORE MAKING ANY STATEMENT OR AT ANY TIME DURING THIS STATEMENT. *ch*

IF I SHOULD DECIDE I DO WANT A LAWYER, AND I CANNOT AFFORD TO HIRE ONE, A LAWYER WILL BE APPOINTED FOR ME FREE OF CHARGE AND I MAY HAVE THAT LAWYER PRESENT BEFORE MAKING ANY STATEMENT. *ch*

I ALSO UNDERSTAND THAT I HAVE THE RIGHT TO STOP AT ANY TIME DURING THIS STATEMENT AND REMAIN SILENT AND HAVE A LAWYER PRESENT. *ch*

I FULLY UNDERSTAND THESE RIGHTS, AND AT THIS TIME I AGREE TO GIVE UP MY RIGHTS AND MAKE THE FOLLOWING STATEMENT: *ch*

ch
 x 11/9
 WITNESS

ch
Caitlin Railo
 SIGNATURE

Statement:

* Denotes questions by Investigator Timothy Dymond.
 : Denotes answers by Caitlin Railo.

Do you read and write the English language?
 Yes.

Do you agree to speak to me without an attorney present?
 Yes

Do you know why you are here today?
 Unfortunately yes. For the bus accident I had dirty blood.

Why was your blood test positive for morphine and Diazepam?
 I am prescribed valium by Dr. Galli so that is why Diazepam came up. I ran out of Suboxone the two days before the accident. I did not go to my doctor and get a refill and I was not allowed to call out of work. I had to work. I took a 200mg Morphine pill. It is round and oblong says 200 on one side. The pill is time released.

When did you take the pill on February 13th 2013?
 12am on the 14th actually.

Did you feel like you should not have gone to work and drive the school bus?
 I felt fine in the morning run I just felt tired in the afternoon run. The pill combined with lack of sleep from the night before caused me to be more tired than normal.

Do you regret driving the school bus that day?
 Yes.

STATE OF NEW YORK

STATEMENTDATED 04/12/2013

Statement:

TD: If you could go back to the day of the accident would you have taken the day off?

DR: If i could I would have. Under no circumstances can I call out because nobody else can do my run.

TD: Do you have a drug problem?

DR: No.

TD: Is there anything you would like to add?

DR: I got out of the bus and saw how hurt the other kid was and his face was banged up. I had a child on the bus so I asked the child to not look when I went to see how hurt the other driver was. I grabbed the child off the bus. The little girl is probably traumatized. I now the other driver got air lifted. I have nightmares about seeing the other driver's face. I was tired and I wished they would have at me call out. My boss told me that I could not call out under any circumstances.

TD: Are you giving this statement on your own free will without or threat or promise by the NY state police?

DR: Yes.

DR

Notice

(Penal Law §210.45)

In a written instrument, any person who knowingly makes a false statement which such a person does not believe to be true has committed a crime under the laws of the state of New York punishable as a Class A Misdemeanor.

Affirmed under penalty of perjury

this 12TH day of APRIL, 2013

- OR -

* Subscribed and Sworn to before me

this _____ day of _____

* This form need be sworn to only when specifically required by the court

Carlton Kail
(SIGNATURE OF PERSON GIVING STATEMENT)

Tim
(WITNESS)

Timothy Dymov
(NAME OF PERSON TAKING STATEMENT)

END: 12:45 PM

E-6

DIGITAL PHOTO RECORD

INSTRUCTIONS:

- Complete a separate form for each investigation recorded on digital media
- Print or type all entries

| | | | | | | |
|---|--|-----------|---|-------|------|-----------|
| STATION AND CASE NUMBER SP Middletown SJS#4973209 | | ID LEAD # | DATE 02/14 & 15/2013 | BEGAN | TIME | COMPLETED |
| INVESTIGATING MEMBER Investigator Timothy M. Dymond | | | PHOTOGRAPHER'S NAME Investigator Joseph W. Gallagher and Timothy M. Dymond | | | |
| CRIME OR INCIDENT Serious Personal Injury Auto Accident | | | WEATHER Clear | | | |
| ADDRESS OR LOCATION State Route 209 and Peenpack Trail, Town of Deerpark | | | COUNTY Orange | | | |
| COMPLAINANT - DEFENDANT - DECEASED Caitlin H. Railo | | | DATE OF BIRTH 08/12/1981 | | | |
| VEHICLE(S) OPERATOR - GENERAL DESCRIPTION OF SCENE N/A | | | ACTION REQUESTED <input type="checkbox"/> BURN TO CD/DVD <input checked="" type="checkbox"/> PRINT 1 X'S <input type="checkbox"/> RETAIN | | | |

| | | | | | |
|---|-------------------|---------------|------------------------------|--|--|
| IMAGE TYPE OR FILE FORMAT <input checked="" type="checkbox"/> JPEG <input type="checkbox"/> TIF <input type="checkbox"/> RAW | CAMERA Olympus | PAGE # 1 OF 1 | DATE SUBMITTED TO ID SECTION | MANNER SUBMITTED: (Check one) <input checked="" type="checkbox"/> CD/DVD <input type="checkbox"/> FLOPPY <input type="checkbox"/> E-MAIL <input type="checkbox"/> OTHER | |
|---|-------------------|---------------|------------------------------|--|--|

| IMAGE# | CAMERA PHOTO ID# | DESCRIPTION: | IMAGE# | CAMERA PHOTO ID# | DESCRIPTION: |
|--------|------------------|----------------------------|--------|------------------|--------------|
| 1 | P2140090.JPG | Both Vehicles | 39 | | |
| 2 | P2140091.JPG | Intersection | 40 | | |
| 3 | P2140092.JPG | Both Vehicles | 41 | | |
| 4 | P2140093.JPG | Both Vehicles | 42 | | |
| 5 | P2140094.JPG | Both Vehicles | 43 | | |
| 6 | P2140095.JPG | Bus | 44 | | |
| 7 | P2140096.JPG | Bus | 45 | | |
| 8 | P2140097.JPG | Gouge on roadway, ST209 | 46 | | |
| 9 | P2140098.JPG | License Plate from Honda | 47 | | |
| 10 | P2140099.JPG | Both Vehicles | 48 | | |
| 11 | P2140100.JPG | Drivers Radio and controls | 49 | | |
| 12 | P2140101.JPG | Bus Data Storage Box | 50 | | |
| 13 | P2140102.JPG | Bus Data and Recorder | 51 | | |
| 14 | P2140103.JPG | Bus | 52 | | |
| 15 | | | 53 | | |
| 16 | | | 54 | | |
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E-7

| | | | |
|---------------------------|--------------------------|---|-------------------------|
| 1. NYSID No. 09967087Z | 2. CJTN No. 66003487Z | 3. Case No. 4973209 | 4. Ref. No. |
| 5. FBI No. 161664TB0 | 6. Arrest No. 562190 | 7. Agency F2 TROOP F - ZONE 2 NY1350200. | 8. Div/Precinct F221 |
| | | 4a. | |

DEFENDANT INFORMATION

| | | | |
|---|---|--|--------------------------|
| 9. Name (Last, First, Middle) RAILO, CAITLIN, H | | 11. Phone Number [REDACTED] | |
| 12. Street Number and Name, Bldg. No., Apt. No. 5 WHITE ST APT 2 | | 13. City, State, Zip PORT JERVIS NY 12771 | |
| 14. Residence Status RESIDENT | | | |
| 15. Place of Birth USA | 16. D.O.B 08/12/1981 | 17. Age 31 | 18. Gender FEMALE |
| 19. Race WHITE | | 20. Ethnicity NOT HISPANIC | |
| 21. Skin FAIR | 22. Height 5ft. 5in. | 23. Weight 125lbs. | 24. Hair BROWN |
| 25. Eyes BROWN | | 26. Glasses NO | 27. Build PETITE |
| 28. Marital Status SEPARATED | | 29. U.S. Citizen YES | |
| 30. Citizen Of USA | | | |
| 31. Soc. Sec. No. [REDACTED] | 32. Education COLLEGE YEARS (ENTER 13-16) - 13 | | 33. Religion CATHOLIC |
| 34. Occupation SERVICE OCCUPATIONS | | 35. Employed EMPLOYED PART TIME | |
| 36. Scars/Marks/Tattoos Description NONE | | | |

ARREST INFORMATION

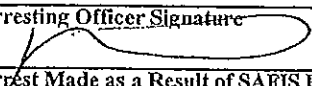

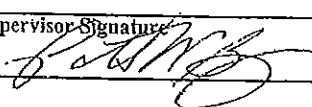
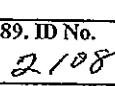
| | | | | | |
|---|--------------------------------------|---|---|-------------------------------|----------------------|
| 37. Arresting Officer/ID QUINONES DANIEL TPR 3823 | | 39. Assisting Officer/ID LAMONICA JARED TPR 2042 | | 41. Arrest Date 04/12/2013 | 42. Time 11:40 |
| 43. Location of Arrest 5 WHITE ST APT 2 PORT JERVIS NEW YORK 12771 | | 44. Juvenile NO | 45. Condition of Defendant APPARENTLY NORMAL | | |
| 48. Miranda YES | 49. Miranda By DYMOND TIMOTHY INV | | 50. Miranda Date 04/12/2013 | 51. Miranda Time 11:56 | |
| 52. Statements WRITTEN | 54. Search Warrant NO | 55. ID Procedure NONE | | | |
| 56. Arraign. Court DEBRPARK TOWN COURT NY035071J | | 57. Arraign. Judge T/J OSOWICK | | | |
| 58. Arraign Date 04/12/2013 | 59. Arraign Time 15:00 | 60. Property NO | 61. Evidence NO | 61a. Processed By NONE | |
| 61b. Disposition CLOSED | | 63. Arrestee Status CASH BAIL | | 64. Bail Amount \$ 0.00 | |
| 65. Bondsman | 66. Photo No. | 67. Arrest Type CRIME IN PROGRESS | | 68. Warrant No. | |
| 69. Arrest FOA NO | 70. Other Agency | | | | 71. E/P Taken YES |
| 76. Return Court | | 77. Return Judge | | | |
| 78. Date | 79. Time | 80. Defendant/Case TOT Agency | | 80a. Officer Name | |
| 81. Case TOT Time | 82. Case TOT Date | 43a. CTV Code PORT JERVIS CITY 3635 | | | |

INCIDENT INFORMATION

| 62. Incident No. | 72. Offense Location | 73. Offense Date/Time | 74. No. Offender | 75. No. Victims | Incident Case No. |
|------------------|----------------------|-----------------------|------------------|-----------------|-------------------|
| 4973209 | DEERPARK TOWN 3654 | 2/14/2013 16:20 | 1 | 1 | |

OFFENSE INFORMATION

| 83. LAW Article/Section | SUB | CL | CAT | DEG | ATI | NAME OF OFFENSE | CTS | NCIC Code | Victim Age Sex Hcdp | ASSOC NO | TYPI |
|-------------------------|-----|----|-----|-----|-----|--------------------------------|-----|-----------|---------------------|----------|------|
| PL 120.04 | 03 | D | F | 1 | C | VEH ASLT I:PREV CONV VTL 1192 | 1 | 1399 | | | UTT |
| Incident 4973209 | | | | | | | | | | | |
| VTL 1192 | 04B | E | F | 0 | C | DWAI DRG: SCHOOL BUS W/STUDENT | 1 | 5403 | | | |
| Incident 4973209 | | | | | | | | | | | |
| PL 260.10 | | A | M | 0 | C | ENDANGERING WELFARE OF CHILD | 1 | 3899 | | | |
| Incident 4973209 | | | | | | | | | | | |

| | | | |
|---|---|--|---|
| 86. Arresting Officer Signature | 87. ID No. | 88. Supervisor Signature | 89. ID No. |
|  |  |  |  |
| 90. Arrest Made as a Result of SAFIS Print ID? NO | 91. | 92. | 93. |

E-8

**Partners In Safety...**

800 Route 17M
 Middletown, NY 10940
 845-341-0515 ext. 311

ATTENTION:

Michael Martucci
 Quality Bus Service (2103)
 P.O. Box 600
 Sparrowbush, NY 12780

Home Base: Port Jervis (P)
 Participant: Caitlin H. Railo
 Participant ID: 223
 SSN: [REDACTED]

Results of DOT Controlled Substance Test

Record Status: Positive
 Test Type: Post-accident
 Collection Date/Time: 02/14/2013 6:45 PM
 Batch ID: 20130221
 Specimen ID: 0938542566
 Date COC Received: 02/15/2013
 Sample Type: Urine
 Test Panel: 5-Substances

Laboratory: Lab Corp. Of America
 69 First Avenue
 Raritan, NJ 08869
 Collection Site: On-Site

Specimen Collector: AMY PISCAPO
 DOT Admin(s): FMCSA

| <u>Test Performed</u> | <u>Result</u> |
|-----------------------|---------------|
| Amphetamines | Negative |
| Marijuana | Negative |
| Phencyclidine | Negative |

| <u>Test Performed</u> | <u>Result</u> |
|-----------------------|---------------|
| Cocaine | Negative |
| Opiates | Positive |

This test was performed, recorded, and reported in accordance with CFR 49 Part 40

Russell Kamer, MD

2/21/2013

Verification Date



JOSEPH A. D'AMICO
SUPERINTENDENT

NEW YORK STATE POLICE
MID HUDSON REGIONAL CRIME LABORATORY

Box 10131
Newburgh, NY 12552-0131
(845) 564-4330

TOXICOLOGY REPORT

TO: Captain Joseph A. Tripodo
New York State Police
55 Crystal Run Road
Middletown, New York 10941

March 26, 2013
Lab Case # 13ML-00487
Agency Case # 4973209
F221-SP MIDDLETOWN

SUBJECT: CAITLIN RAILO

February 14, 2013

RESULTS:

| Item Number | Specimen | Ethyl Alcohol % by weight | Drugs Confirmed PRESENT |
|-------------|----------|------------------------------|----------------------------|
| 1 | Blood | 0.00 | Diazepam Morphine |

Toxicology testing included a routine screen for compounds on the attached list. No compounds were detected other than those listed above.

Analysis of the specimen determined it to contain 0.000 \pm 0.000 % by weight ethyl alcohol (at a 99.7% level of confidence, k=3).

(CPL 190.30(2) Certification)

I, Susan B. Gillies, Forensic Scientist III, hereby certify that I am a public servant in the employ of the New York State Police. I further certify this is the original of my report and contains the opinions and interpretations of the examination I performed in the above referenced case.

False Statements made herein are punishable as a class A misdemeanor pursuant to section 210.45 of the Penal Law.

Susan B. Gillies

Charles N. Pompa

Susan B. Gillies

Forensic Scientist III

Charles N. Pompa

Acting Regional Director

Toxicology

This report does not constitute the entire case file. The case file may be comprised of worksheets, images, analytical data and other documents.

cc: Investigator Dymond
Ms. Kerry Bond, Esq.
Trooper Vidacovich, DRE
File



E-91C

Page 1 of 3 Pages

New York State Department of Motor Vehicles

POLICE ACCIDENT REPORT

MV-104A (6/04)

| |
|--------------|
| Local Codes |
| 4973209 |
| SPFF29000082 |

☐ AMENDED REPORT

| | | | | | | | | | | | | | |
|----|--|----------------------------|---|----------------------|---|-----------------|---|--|--|-------|-------|-----------------------|--------------------|
| 1 | Accident Date Month 2 Day 14 Year 2013 | Day of Week Thursday | Military Time 14:36 | No. of Vehicles 2 | No. Injured 1 | No. Killed 0 | Not Investigated at Scene <input type="checkbox"/> | Left Scene <input type="checkbox"/> | Police Photos <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 2 | VEHICLE 1 License ID Number 491879925 Driver Name - exactly as printed on license RAILO, CAITLIN H Address (Include Number and Street) 5 WHITE ST APT 2 City or Town PORT JERVIS State NY Zip Code 12771 Date of Birth Month 8 Day 12 Year 1981 Sex F Unlicensed <input type="checkbox"/> No. of Occupants 02 Public Property Damaged <input type="checkbox"/> Name - exactly as printed on registration QUALITY BUS SERVICE, LLC, Sex C Date of Birth Month 4 Day 28 Year 1993 Address (Include Number and Street) 504 RT 42 PO BOX 600 Apt. No. Haz. Mat. Code Released <input type="checkbox"/> City or Town SPARROWBUSH State NY Zip Code 12780 Plate Number 55171BA State of Reg. NY Vehicle Year & Make 2003 FRHT Vehicle Type BUS Ins. Code 673 Ticket/Arrest Number(s) M2121MV3B5 Violation Section(s) 11924C | | | | VEHICLE 2 <input checked="" type="checkbox"/> VEHICLE 2 <input type="checkbox"/> BICYCLIST <input type="checkbox"/> PEDESTRIAN <input type="checkbox"/> OTHER PEDESTRIAN License ID Number 133478177 Driver Name - exactly as printed on license MAHER, JUSTIN T Address (Include Number and Street) 1 FIFTH STREET Apt. No. City or Town GODEFFROY State NY Zip Code 12729 Date of Birth Month 4 Day 28 Year 1993 Sex M Unlicensed <input type="checkbox"/> No. of Occupants 01 Public Property Damaged <input type="checkbox"/> Name - exactly as printed on registration MAHER, JUSTIN T Sex M Date of Birth Month 4 Day 28 Year 1993 Address (Include Number and Street) 1 FIFTH STREET Apt. No. Haz. Mat. Code Released <input type="checkbox"/> City or Town GODEFFROY State NY Zip Code 12729 Plate Number GCM1437 State of Reg. NY Vehicle Year & Make 1995 HOND Vehicle Type 2DSD Ins. Code 054 Ticket/Arrest Number(s) Violation Section(s) | | | | | | | | |
| 3 | <div style="display: flex; justify-content: space-between;"> <div> <p>Check if involved vehicle is:</p> <p><input type="checkbox"/> more than 95 inches wide;</p> <p><input checked="" type="checkbox"/> more than 34 feet long;</p> <p><input type="checkbox"/> operated with an overweight permit;</p> <p><input type="checkbox"/> operated with an overdimension permit.</p> <p>VEHICLE 1 DAMAGE CODES</p> <p>Box 1 - Point of Impact 1 2</p> <p>Box 2 - Most Damage 3 3</p> <p>Enter up to three more damage codes 4 4 5</p> <p>Vehicle By: HOCKENBERRY'S</p> <p>Towed To: HOCKENBERRY'S</p> <p>VEHICLE DAMAGE CODING:</p> <p>1-13 SEE DIAGRAM ON RIGHT.</p> <p>14. UNDERCARRIAGE 17. DEMOLISHED</p> <p>15. TRAILER 18. NO DAMAGE</p> <p>16. OVERTURNED 19. OTHER</p> </div> <div> <p>Check if involved vehicle is:</p> <p><input type="checkbox"/> more than 95 inches wide;</p> <p><input type="checkbox"/> more than 34 feet long;</p> <p><input type="checkbox"/> operated with an overweight permit;</p> <p><input type="checkbox"/> operated with an overdimension permit.</p> <p>VEHICLE 2 DAMAGE CODES</p> <p>Box 1 - Point of Impact 1 2</p> <p>Box 2 - Most Damage 2 2</p> <p>Enter up to three more damage codes 17 3 4 5</p> <p>Vehicle By: HOCKENBERRY'S</p> <p>Towed To: HOCKENBERRY'S</p> </div> <div> <p>Circle the diagram below that describes the accident, or draw your own diagram in space #9. Number the vehicles.</p> <p>1. Rear End 2. Left Turn 3. Right Angle 4. Right Turn 5. Head On 6. Sidewipe (same direction) 7. Left Turn 8. Right Turn 9. Sidewipe (opposite direction)</p> <p>ACCIDENT DIAGRAM</p> <p>See the last page of the MV-104A for the accident diagram.</p> <p>Cost of repairs to any one vehicle will be more than \$1000.</p> <p><input type="checkbox"/> Unknown/Unable to determine <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> </div> </div> | | | | | | | | | | | | |
| 4 | Reference Marker | Coordinates (If available) | Place Where Accident Occurred: | | | | | | | | | | |
| 5 | 2 0 9 | Latitude/Northing | County ORANGE <input type="checkbox"/> City <input type="checkbox"/> Village <input checked="" type="checkbox"/> Town of DEERPARK | | | | | | | | | | |
| 6 | 8 3 0 1 | Longitude/Easting | Road on which accident occurred PEENPACK TRL | | | | | | | | | | |
| 7 | 2 0 3 2 | 530848 | at 1) intersecting street ROUTE 209 (Route Number or Street Name) | | | | | | | | | | |
| 8 | | | or 2) <input type="checkbox"/> N <input type="checkbox"/> S of (Route Number or Street Name) | | | | | | | | | | |
| 9 | | | (Milepost, Nearest Intersecting Route Number or Street Name) | | | | | | | | | | |
| 10 | Accident Description/Officer's notes | | | | | | | | | | | | |
| 11 | V1 NORTH ON STATE 209 AND MAKES A LEFT TURN ONTO PEENPACK TRAIL IN FRONT OF V2 WHICH WAS TRAVELING SOUTH ON STATE ROUTE 209. WITNESSES STATE THEY OBSERVE V1 STOP ON STATE 209 THEN BEGIN TURNING LEFT ONTO PEENPACK TRAIL FAILING TO YIELD RIGHT-OF-WAY TO V2. WITNESS LYLE VANDUNK STATES V2 WAS APPROXIMATELY 50 YARDS NORTH OF PEENPACK TRAIL JUST PRIOR TO V1 TURNING LEFT. WITNESS #1 LYLE VANDUNK 379 RINGWOOD AVENUE MONAGUR, NJ 07465. WITNESS #2 WILLIA | | | | | | | | | | | | |
| 12 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 BY | TO 18 | Names of all Involved | Date of Death Only |
| 13 | A | 1 | 4 | 1 | 31 | F | - | - | - | | | RAILO, CAITLIN H | |
| 14 | B | 1 | 3 | 1 | 11 | F | - | - | - | | | DONLEY, KIARA | |
| 15 | C | 2 | 1 | X | 19 | M | 12 | X | 2 | 9993 | 5905 | MAHER, JUSTIN T | |
| 16 | D | | | | | | | | | | | | |
| 17 | E | | | | | | | | | | | | |
| 18 | F | | | | | | | | | | | | |
| 19 | Officer's Rank and Signature TROOPER <i>[Signature]</i> Badge/ID No. 3823 NCIC No. 13501 Precinct/Post Troop/Zone F2 Station/Beat Sector 21 Reviewing Officer SMITH, DANIEL Date/Time Reviewed 4/15/2013 21:18 | | | | | | | | | | | | |

POLICE ACCIDENT REPORT

| | |
|--------------|---|
| Local Codes | - |
| 4973209 | |
| SPFF29000082 | |

AMENDED REPORT

33

Page 3 of 3 Pages

New York State Department of Motor Vehicles

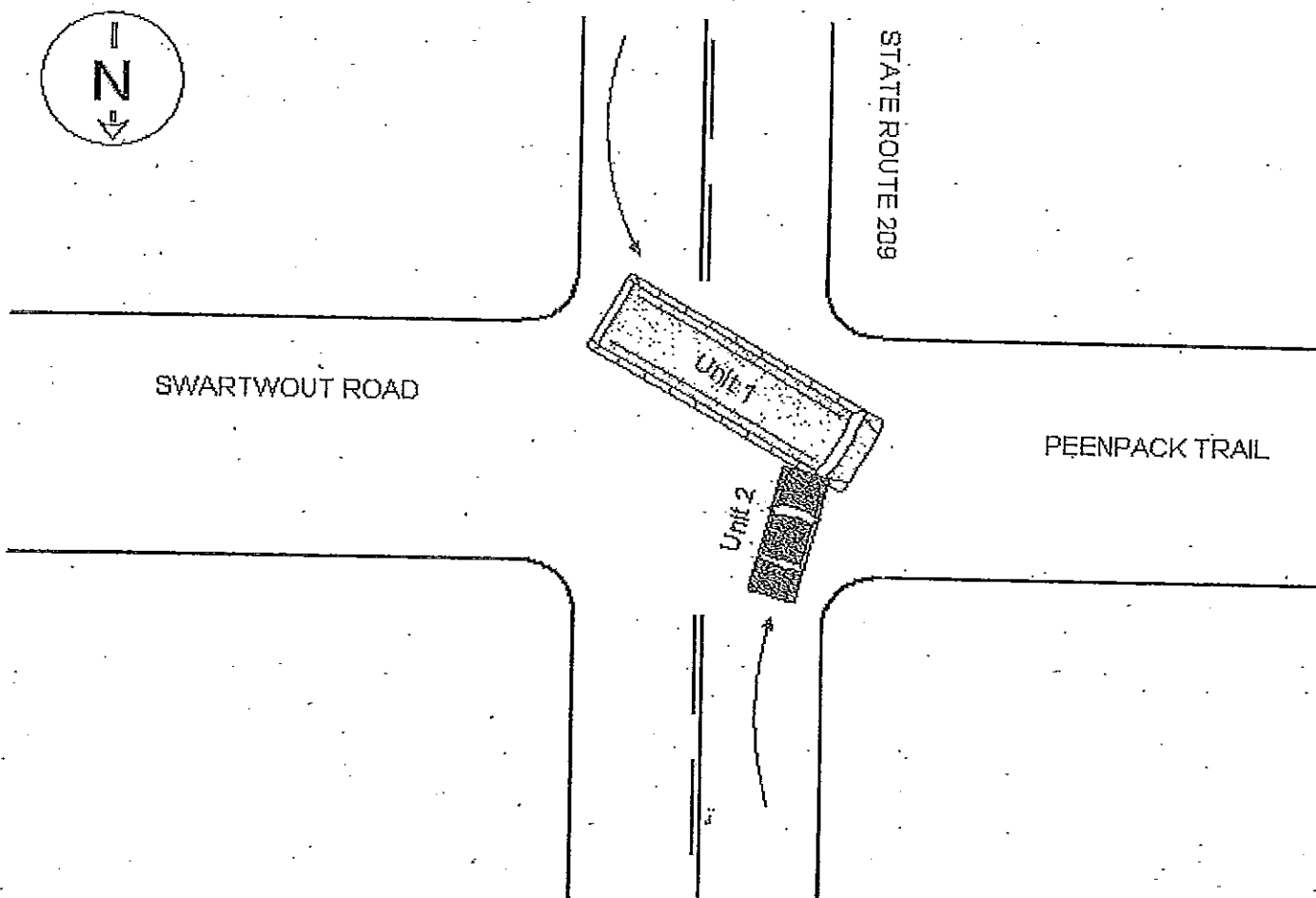
POLICE ACCIDENT REPORT

MV-104A (6/04)

Local Codes
4973209
SPFF29000082

☐ AMENDED REPORT

| | | | | | | | | | | | |
|---------------|-----|------|-------------|---------------|-----------------|-------------|------------|---------------------------|-------------------------------------|--------------------------|---|
| Accident Date | | | Day of Week | Military Time | No. of Vehicles | No. Injured | No. Killed | Not Investigated at Scene | <input type="checkbox"/> | Left Scene | Police Photos |
| Month | Day | Year | | | | | | Accident Reconstructed | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 2 | 14 | 2013 | Thursday | 14:36 | 2 | 1 | 0 | | | | |



New York State Department of Motor Vehicles

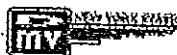
TRUCK and BUS SUPPLEMENTAL
POLICE ACCIDENT REPORT

Page 1 of 1 Pages

Local Codes

4973209

SPFF29000082



MV-104S (10/05)

☐ AMENDED REPORTMail To: NYS Dept. of Motor Vehicles, Accident Records Bureau,
PO Box 2084, Albany NY 12220-0084

INSTRUCTIONS: You must complete this form:

- if at least one of the vehicles involved is
 - a truck having a GVWR or GCWR > 10,000 lbs.; or
 - a vehicle with a Haz Mat placard; or
 - a bus designed to carry 9 or more persons including the driver

- AND at least one of the following conditions is met:
 - at least one person sustained fatal injuries
 - at least one person was transported for IMMEDIATE medical treatment
 - at least one vehicle is disabled and was towed/transported from the scene.

Number of:

0 Trucks having a GVWR
or GCWR > 10,000 lbs.0 Vehicles with a Haz Mat
placard1 Buses designed to carry 9
or more persons

Number of Vehicles:

2 Towed/transported from
scene due to damage

Number of Persons:

0 Sustaining fatal injuries

2 Transported for IMMEDIATE
medical treatment

ACCIDENT DATE

Mo. Day Year
2 14 2013

MILITARY TIME

14:36

COUNTY

ORANGE

CITY/TOWN/VILLAGE

DEERPARK, TOWN OF

DRIVER

DRIVER

LICENSE ID

4 9 1 8 7 9 9 2 5

STATE OF LIC.
NY

DRIVER NAME - exactly as printed on license (Last, First, M.I.)

RAILO, CAITLIN H

1
2

LICENSE CLASS

1 A

2 B

3 CDL C

4 D

5 DJ

DATE OF BIRTH

Mo.

Day

Year

SEX

1 Male

2 Female

7

CARRIER NAME:

QUALITY BUS SERVICE LLC

STREET OR P.O. BOX

504 RT 42 PO BOX 600

CITY

SPARROWBUSH

STATE

NY

ZIP CODE

12780

TOTAL AXLES

(includes trailers)

8

PLATE NUMBER

55171BA

STATE OF REG.

NY

CARRIER'S IDENTIFICATION NUMBERS

US DOT 4 7 8 5 9 6 3

ICC MC

2

2
2

WEIGHT RATING OF TRUCK POWER UNIT

1 Less than or equal to 10,000 lbs.

2 10,001 - 26,000 lbs.

3 More than 26,000 lbs.

VEHICLE IDENTIFICATION NUMBER

4 U

Z

A

A

X

C

S

4

3

C

L

0

4

7

6

2

3
1

VEHICLE CONFIGURATION

1 Bus (seats for more than 15 people, including driver)

2 Single-unit Truck: (2-axle, 6-tire)

3 Single-unit Truck: (3 or more axles)

4 Truck/Trailer

5 Truck Tractor (bobtail)

6 Tractor/Semi-trailer

7 Tractor/Doubles

8 Tractor/Triples

9 Unknown Heavy Truck, cannot classify

10 Passenger Car - only record when vehicle displays a
Hazardous Material placard11 Light truck (van, mini-van, panel, pickup, sport utility
vehicle)-only record when vehicle displays a HM placard

12 Bus (seats for 9-15 people, including driver)

TRAFFIC WAY

1 Two-way, not divided

2 two-way, divided

unprotected median

3 Two-way, divided, positive

median barrier

4 One way not divided

5 Not reported

9

1

4
1

CARGO BODY TYPE

1 Bus (seats for more than 15 people, including driver)

2 Van/Enclosed Box

3 Cargo Tank

4 Flatbed

5 Dump

6 Concrete Mixer

7 Auto Transporter

8 Garbage/Refuse

9 Other

10 Grain, Chips, Gravel

11 Pole

12 Bus (seats for 9-15 people,

including driver)

ACCESS CONTROL

1 No Access Control

2 Full Access Control

4 Partial Access Control

10

1

5
2

HAZARDOUS MATERIALS INVOLVEMENT

Does vehicle have Haz Mat placard? 1 Yes 2 No

COPY FROM PLACARD:

4-digit identification number
from diamond/orange panel1 or 2-digit number from
bottom of diamondNAME OF HAZ
MAT CLASS:WAS HAZARDOUS CARGO RELEASED FROM
VEHICLE (other than fuel from fuel tank)?

1 Yes

2 No

SEQUENCE OF EVENTS (FOR THIS VEHICLE)

1 Ran Off Road (noncollision)

2 Jackknife (noncollision)

3 Overturn/Rollover (noncollision)

4 Downhill Runaway (noncollision)

5 Cargo Loss or Shift (noncollision)

6 Explosion or Fire (noncollision)

7 Separation of Units (noncollision)

8 Involving Pedestrian (collision)

9 Involving Motor Vehicle in Transport (collision)

10 Involving Parked Motor Vehicle (collision)

11 Involving Train (collision)

12 Involving Pedalcycle (collision).

13 Involving Animal (collision)

14 Involving Fixed Object (collision)

18 Cross Median/Centerline (noncollision)

19 Equipment Failure (noncollision)

(brake failure, blown tires, etc.)

20 Other (noncollision)

21 Unknown (noncollision)

22 With Work Zone Maintenance

Equipment (collision)

23 With Other Movable Object (collision)

24 With Unknown Movable Object

(collision)

11

9

12

13

14

6
2

OFFICER'S RANK AND SIGNATURE

TROOPER

BADGE/ID NO.

3823

NCIC NO.

13501

DATE OF REPORT

2/14/2013

PRINT NAME IN
FULL

D Quinones